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STANZIONE & 919 18TH STRE SUITE 440	ET, N.W.	1 2007 By . I ho					
WASHINGTON	, DC 20006	TRADELIS	<u> </u>			(Depositor's name)	
							(Signature)
				•			(Date)
APPLICATION NO.	APPLICATION NO. FILING DATE		FIRST NAMED INVENTOR		ATTORNEY DOCKET NO.		CONFIRMATION NO.
10/767,742	01/30/2004	/ Tac-Eun Park			103-1003	5722	
TITLE OF INVENTION:	AGV CONTROL SYS	TEM AND METHOD					
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUI	E FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$300	\$0		\$1700	10/15/2007
EXAMINER		ART UNIT .	CLASS-SUBCLASS			•	
NGUYEN, CUONG H 3661			701-023000				
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).			2. For printing on the patent front page, list Stanzione & Kim, LLP				
Change of corresponded Address form PTO/SB	•	or agents OR, alternatively, (2) the name of a single firm (having as a member a					
"Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed?/12/2007 JADDU2 00000025 502827 10767742				
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) 01 FC:1501 1400.00 DA							
PLEASE NOTE: Unless an assignce is identified below, no assignce data will appear on the patent. Of the accument has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.							
(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)							
Samsung Elec	ctronics Co., Ltd.	Suwon-si, Republic of Korea					
Please check the appropria	ate assignee category or	categories (will not be pr	inted on the patent):	Individual 🛛 Co	rporation	n or other private gro	ip entity Government
4a. The following fee(s) a Silssue Fee Publication Fee (No	o small entity discount p	b. Payment of Fcc(s): (Please first reapply any previously paid issue fee shown above) A check is enclosed. Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 502827 (enclose an extra copy of this form).					
5. Change in Entity State	•	•					* *
☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).							
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Authorized Signature	\mathcal{A}	VIIVI M		Date	Sep	tember 11, 200	
Typed or printed name		Kim The information		Registration N	lo	50,012	

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